

POSITION DESCRIPTION (Please Read Instructions on the Back)

2. Reason for Submission										3. Service										4. Employing Office Location										5. Duty Station										1. Agency Position No.																													
<input type="checkbox"/> Redescription <input checked="" type="checkbox"/> New <input type="checkbox"/> Reestablishment <input type="checkbox"/> Other										<input type="checkbox"/> Hdqtrs <input checked="" type="checkbox"/> Field																														6. OPM Certification No.																													
Explanation (Show any positions replaced)										7. Fair Labor Standards Act										8. Financial Statements Required										9. Subject to IA Action																																							
Standard MWR NAF PD										<input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Nonexempt										<input type="checkbox"/> Executive Personnel Financial Disclosure <input type="checkbox"/> Employment and Financial Interest										<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																																							
										10. Position Status										11. Position Is										12. Sensitivity										13. Competitive Level Code																													
										<input type="checkbox"/> Competitive <input type="checkbox"/> Excepted (Specify in Remarks) <input type="checkbox"/> SES (Gen.) <input type="checkbox"/> SES (CR)										<input type="checkbox"/> Supervisory <input type="checkbox"/> Managerial <input checked="" type="checkbox"/> Neither										<input checked="" type="checkbox"/> 1--Non-Sensitive <input type="checkbox"/> 3--Critical <input type="checkbox"/> 2--Noncritical Sensitive <input type="checkbox"/> 4--Special Sensitive										14. Agency Use																													
15. Classified/Graded by										Official Title of Position										Pay Plan										Occupational Code										Grade										Initials										Date									
a. Office of Personnel Management																																																																					
b. Department, Agency or Establishment																																																																					
c. Second Level Review										Office Automation Clerk										NF										0326										01										JN 12-31-01																			
d. First Level Review																																																																					
e. Recommended by Supervisor or Initiating Office																																																																					
16. Organizational Title of Position (if different from official title)																				17. Name of Employee (if vacant, specify)																																																	
18. Department, Agency, or Establishment																				c. Third Subdivision																																																	
a. First Subdivision																				d. Fourth Subdivision																																																	
b. Second Subdivision																				e. Fifth Subdivision																																																	
19. Employee Review-This is an accurate description of the major duties and responsibilities of my position.																				Signature of Employee (optional)																																																	
20. Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the knowledge that																				this information is to be used for statutory purposes relating to appointment and payment of public funds, and that false or misleading statements may constitute violations of such statutes or their implementing regulations.																																																	
a. Typed Name and Title of Immediate Supervisor																				b. Typed Name and Title of Higher-Level Supervisor or Manager (optional)																																																	
Signature										Date										Signature										Date																																							
21. Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5, U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards apply directly, consistently with the most applicable published standards.																				22. Position Classification Standards Used in Classifying/Grading Position																																																	
Typed Name and Title of Official Taking Action																				OPM PCF Office Automation Clerical & Assistance Series GS-0326, TS-100 Nov 90 Grade Level Guide for Clerical & Asst Work																																																	
S. J. NEW																				Information for Employees. The standards, and information on their application, are available in the personnel office. The classification of the position may be reviewed and corrected by the agency or the U.S. Office of Personnel Management. Information on classification/job grading appeals, and complaints on exemption from FLSA, is available from the personnel office or the U.S. Office of Personnel Management.																																																	
Principal Classifier																																																																					
Signature										Date																																																											
										12-31-01																																																											
23. Position Review										Initials										Date										Initials										Date										Initials										Date									
a. Employee (optional)																																																																					
b. Supervisor																																																																					
c. Classifier																																																																					
24. Remarks																																																																					
25. Description of Major Duties and Responsibilities (See Attached)																																																																					

NONAPPROPRIATED FUND POSITION DESCRIPTION JOB TITLE: Office Automation Clerk

POSITION NUMBER 01-0063 **JOB SERIES:** 0326 **PAY LEVEL:** NF-1 **Summary of Duties:**

Incumbent performs any combination of the following duties:

Operates a personal computer, types routine documents, recognizes apparent errors in documents submitted, and refers the same to supervisor or designated personnel for correction.

Operates various common office equipment to include copier, fax, shredder, and postage meter. May be required to receive telephone calls, assist customers, file routine documents, compile data and perform other routine clerical tasks.

Performs other related duties as assigned.

Minimum Qualifications:

Six months experience preferred that demonstrates a knowledge sufficient to perform the above listed duties with normal supervision.